# **Recycling Market Development Zone Tax Credit**

Taxpayers claiming this credit must complete this form and attach it to their individual income or corporate franchise tax return. The Department of Community and Economic Development must sign or certify (see address on back) if you are seeking credit for machinery or equipment. See the reverse side of this form for detailed instructions.

PARIA									
Name of taxpayer claiming credit  Taxpayer's identification						tification	numb	er (SSN or EIN)	
Address of taxpayer claiming credit					Telephone num	Telephone number			
City					State	State		ZIP Code	
Certification by the Department of Communitegral to the composting or recycling procession of a recycling zone.	unity and	d Economic Developm taxpayer named in PAR	ent: I certify	that the orm and t	machinery and ed the named compa	quipmen	t pur	chased below are within the	
Authorized signature by DCED				Title				Date signed	
PART B									
List machinery and equipment pu				purchased Da purch			te ased Purchase price		
								\$	
								\$	
								\$	
								\$	
Add all purchases in F							ART B Total purchases		
				Multipl	ly total purchases	by .05 (	5%)	Total credit allowed	
PART C									
List rent, wages paid, supplies, tools, test inventory, and utilities purchased	Date paid	Amounts paid during tax year			d, supplies, tools, te utilities purchased	st Date paid		Amounts paid during tax year	
		\$						\$	
		\$						\$	
		\$						\$	
		\$						\$	
Add all amounts paid in F							ГС	Total paid	
Multiply total payments by .20. If this a is greater than \$2,000, only enter \$2,000, only							unt	Total credit allowed	
PART D									
Line 1 Add total credits allowed from PART B and PART C. Enter sum on this line.							\$		
Line 2 If you are a Utah resident, multiply line 21 of your Utah income tax return by .40 (40%). If you are a non-resident or part-year resident, multiply line 22 of your Utah income tax return by .40 (40%).							2 \$		
Line 3 Enter the smaller of the amounts on line 1 or line 2. This is your tax credit.							3 \$		
IMPORTANT - PLEASE READ Refer to the instructions for your INCOME 7 FIDUCIARY TAX (TC-41) to determine the I					or				
PART E									
Any unused amount of the total credit al equipment under PART B, may be carri			that is attr	butable	to purchases of	f qualifi	ed n	·	
Carryforward Amounts				Τ.				Applied to tax y	
Line 1 Amount of tax credit carried forward - first year				\$					
Line 2 Amount of tax credit carried forward - second year				\$					
Line 3 Amount of tax credit carried forward - third year				\$					

For tax years beginning January 1, 1996 and ending on or before December 31, 2000, the Utah Legislature authorized a nonrefundable tax credit to individuals and corporations in a recycling market development zone, as defined in Utah Code Section 9-2-1602. The credit consists of: (a) 5 percent of the purchase price paid during the taxable year for machinery and equipment used directly in commercial composting, or manufacturing facilities or plant units that manufacture recycled items or reduce or reuse postconsumer waste material; and (b) 20 percent of net expenditures, up to a maximum credit of \$2,000 to third parties for rent, wages, supplies, tools, test inventory, and utilities made by the taxpayer for establishing and operating recycling or composting technology in Utah.

### **PART A**

Enter name and address information of taxpayer. PART A is where the Department of Community and Economic Development will signed, authorizing this credit.

#### PART B

List any machinery or equipment purchased that is used directly in commercial composting or in manufacturing facilities or plant units that manufacture, process, compound or produce recycled items for sale or reduce or reuse postconsumer waste material. Enter the purchase price for the machinery or equipment in the appropriate column. Add all purchases and multiply the total purchases by .05. This represents the total amount that can be used as a credit for machinery and equipment.

# **PART C**

List expenditures for rent, wages, supplies, tools, test inventory, and utilities and the amount of the expenditure in the appropriate column. Total all expenditures listed in PART C and multiply the total by .20 (20%). If the amount is greater than \$2,000, only enter \$2,000.

#### **PART D**

Add together the "*Total credit allowed*" from PARTS B and C. If you are a Utah individual resident, multiply the amount on line 21 of your Utah income tax return by .40 (40%). If you are a nonresident or part-year resident multiply the amount on line 22 of your Utah income tax return by .40 (40%). Your credit on line 33i of your Utah income tax return is the smaller of line 1 and line 2.

# **PART E**

Taxpayers may carry forward for three years any of the unused total credit allowed in PART D, line 3, that is attributable to purchases of qualified machinery and equipment under PART B. Indicate the amounts you are carrying forward, along with the appropriate years, on lines 1 through 3 of PART E.

Carryforward recycling market development zone credits shall be applied against Utah individual income or corporate franchise tax due before the application of any recycling market development zone tax credits earned in the current year and on a first-earned, first-used basis.

This form must be completed and signed in PART A and attached to the initial Utah income tax return. If you carry forward this tax credit, you must attach a copy of this completed form, with the new carryforward amount, to your Utah tax return.

Taxpayers must keep copies of tax credit records for three years from the date the return is filed.

To approve this credit, contact the Department of Community and Economic Development, 324 South State Street, Fifth Floor, Salt Lake City, Utah 84114-7360, telephone number (801) 538-8804.

If you need additional information, please contact the Utah State Tax Commission at (801) 297-2200 or toll free 1-800-662-4335, if outside the Salt Lake area. The address is 210 N 1950 W, Salt Lake City, Utah 84134.

If you need an accommodation under the Americans with Disabilities Act, contact the Tax Commission at (801) 297-3811 or TTY (801) 297-3819. Please allow three working days for a response.